

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS Offeror To Complete Block 12, 17, 23, 24, & 30				1. Requisition Number SEE SCHEDULE		Page 1 Of 4							
2. Contract No. DAAE20-03-D-0078		3. Award/Effective Date 2004OCT12		4. Order Number 0009		5. Solicitation Number		6. Solicitation Issue Date					
7. For Solicitation Information Call:		A. Name SHERYL DEVOL			B. Telephone Number (No Collect Calls) (309)782-6602			8. Offer Due Date/Local Time					
9. Issued By TACOM-ROCK ISLAND AMSTA-LC-CTM-M ROCK ISLAND IL 61299-7630				Code W52H09		10. This Acquisition Is <input checked="" type="checkbox"/> Unrestricted <input type="checkbox"/> Set Aside: % For <input type="checkbox"/> Small Business <input type="checkbox"/> Hubzone Small Business <input type="checkbox"/> 8(A) NAICS: 333912 Size Standard:		11. Delivery For FOB Destination Unless Block Is Marked <input type="checkbox"/> See Schedule <input checked="" type="checkbox"/> 13a. This Contract Is A Rated Order Under DPAS (18 CFR 700) 13b. Rating DOA5 14. Method Of Solicitation <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP		12. Discount Terms			
e-mail: DEVOLS@RIA.ARMY.MIL													
15. Deliver To XU TRANSPORTATION OFFICER DDSP NEW CUMBERLAND FACILITY BUILDING MISSION DOOR 113 134 NEW CUMBERLAND PA 17070-5001				Code W25G1U		16. Administered By DCMA MARYLAND 217 EAST REDWOOD ST SUITE 1800 BALTIMORE MD 21202-5299						Code S2101A	
Telephone No.													
17. Contractor/Offeror MATTEI COMPRESSORS, INC GROUP 9635 LIBERTY ROAD RANDALLSTOWN, MD. 21133-2436				Code OJCW2 Facility		18a. Payment Will Be Made By DFAS COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P O BOX 182264 COLUMBUS OH 43218-2264						Code HQ0338	
Telephone No.													
<input type="checkbox"/> 17b. Check If Remittance Is Different And Put Such Address In Offer						18b. Submit Invoices To Address Shown In Block 18a Unless Block Below Is Checked <input type="checkbox"/> See Addendum							
19. Item No.		20. Schedule Of Supplies/Services				21. Quantity		22. Unit		23. Unit Price		24. Amount	
		SEE SCHEDULE											
		(Use Reverse and/or Attach Additional Sheets As Necessary)											
25. Accounting And Appropriation Data ACRN: AA 97 X4930AC9G 6D 26KB S11116 W52H09										26. Total Award Amount (For Govt. Use Only) \$85,218.39			
<input type="checkbox"/> 27a.Solicitation Incorporates By Reference FAR 52.212-1,52.212-4,FAR 52.212-3 And 52.212-5 Are Attached. Addenda <input type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.													
<input checked="" type="checkbox"/> 27b.Contract/Purchase Order Incorporates By Reference FAR 52.212-4. FAR 52.212-5 Is Attached. Addenda <input checked="" type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.													
<input type="checkbox"/> 28. Contractor Is Required To Sign This Document And Return _____ Copies to Issuing Office. Contractor Agrees To Furnish And Deliver All Items Set Forth Or Otherwise Identified Above And On Any Additional Sheets Subject To The Terms And Conditions Specified Herein.										<input type="checkbox"/> 29. Award Of Contract: Ref. _____ Offer Dated _____. Your Offer On Solicitation (Block 5), Including Any Additions Or Changes Which Are Set Forth Herein, Is Accepted As To Items:			
30a. Signature Of Offeror/Contractor						31a. United States Of America (Signature Of Contracting Officer)							
30b. Name And Title Of Signer (Type Or Print)				30c. Date Signed		31b. Name Of Contracting Officer (Type Or Print) DONNA L WEBB /SIGNED/ WEBBD@RIA.ARMY.MIL (309)782-6369				31c. Date Signed			
Authorized For Local Reproduction Previous Edition Is Not Usable										Standard Form 1449 (Rev. 4/2002) Prescribed By GSA-FAR (48 CFR) 53.212			

19. Item No.	20. Schedule Of Supplies/Services	21. Quantity	22. Unit	23. Unit Price	24. Amount

32a. Quantity In Column 21 Has Been

☐ Received ☐ Inspected ☐ Accepted, And Conforms To The Contract, Except As Noted: _____

32b. Signature Of Authorized Government Representative		32c. Date	32d. Printed Name and Title of Authorized Government Representative		
32e. Mailing Address of Authorized Government Representative			32f. Telephone Number of Authorized Government Representative		
			32g. E-Mail of Authorized Government Representative		
33. Ship Number		34. Voucher Number	35. Amount Verified Correct For	36. Payment	37. Check Number
<input type="checkbox"/> Partial	<input type="checkbox"/> Final			<input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final	
38. S/R Account Number	39. S/R Voucher Number	40. Paid By			
41a. I Certify This Account Is Correct And Proper For Payment			42a. Received By (Print)		
41b. Signature And Title Of Certifying Officer			41c. Date	42b. Received At (Location)	
				42c. Date Rec'd (YY/MM/DD)	42d. Total Containers

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN DAAE20-03-D-0078/0009 MOD/AMD	Page 2 of 4
Name of Offeror or Contractor: MATTEI COMPRESSORS, INC GROUP		

SUPPLEMENTAL INFORMATION

- 1. The purpose of this delivery order is to 89 Air Compressors.
- 2. The unit price of \$957.51 reflects the unit price for ordering period 2. The total value of this delivery order is \$85,218.39 and is in the best interest of the Government.
- 3. All other terms and conditions remain unchanged.

*** END OF NARRATIVE A 001 ***

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN DAAE20-03-D-0078/0009 MOD/AMD	Page 3 of 4
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Name of Offeror or Contractor: MATTEI COMPRESSORS, INC GROUP

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	SUPPLIES OR SERVICES AND PRICES/COSTS				
0001	NSN: 4310-01-432-9655 FSCM: 59678 PART NR: 11B257019 SECURITY CLASS: Unclassified				
0001AL	<u>PRODUCTION QUANTITY</u> NOUN: COMPRESSOR UNIT,REC PRON: M142TJ27M1 PRON AMD: 03 ACRN: AA AMS CD: 06001100 <u>Packaging and Marking</u> <u>Inspection and Acceptance</u> INSPECTION: Destination ACCEPTANCE: Destination <u>Deliveries or Performance</u> DOC				

Name of Offeror or Contractor: MATTEI COMPRESSORS, INC GROUP

CONTRACT ADMINISTRATION DATA

PRON/										JOB					
LINE	AMS	CD/	OBLG							ORDER	ACCOUNTING		OBLIGATED		
<u>ITEM</u>	<u>MIPR</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>					<u>NUMBER</u>	<u>STATION</u>	<u>AMOUNT</u>				
0001AL	M142TJ27M1	AA	2	97	X4930AC9G	6D	26KB	S11116		W52H09	\$	85,218.39			
	06001100														
											TOTAL	\$	85,218.39		
SERVICE										ACCOUNTING		OBLIGATED			
<u>NAME</u>	<u>TOTAL BY ACRN</u>		<u>ACCOUNTING CLASSIFICATION</u>							<u>STATION</u>	<u>AMOUNT</u>				
Army		AA	97	X4930AC9G	6D	26KB	S11116			W52H09	\$	85,218.39			
											TOTAL	\$	85,218.39		